| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  Application or Docket Number  0630-1835 |   |                                  |               |               |                                |                               |                  |     |          |              |                        |        | 2 2          |                        |
|---|---|----------------------------------|---------------|---------------|--------------------------------|-------------------------------|------------------|-----|----------|--------------|------------------------|--------|--------------|------------------------|
|   |   | SMALL ENTITY TYPE C              |               |               |                                | OTHER THAN<br>OR SMALL ENTITY |                  |     |          |              |                        |        |              |                        |
| TOTAL CLAIMS  |   |                                  | 18            |               |                                |                               |                  | RA  | TE       | FEE          |                        | RATE   | FEE          |                        |
| FOR   |   |                                  | NUMBER FILED  |               | NUMBER EXTRA                   |                               |                  |     | BAŞI     | C FEE        | 385.00                 | OR     | BASIC FEE    | 770.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |                                  | 18 minus 20=  |               | . 0                            |                               |                  |     | XS       | 9=           |                        | OR     | XS18=        | 0                      |
| INDEPENDENT CLAIMS  |   |                                  | U minus 3 =   |               | •                              |                               |                  |     | X43=     |              |                        | OR     | X86≈         | 86                     |
| MUL   | TIPLE DEPEN   | DENT CLAIM PR                    | ESENT         |               |                                |                               | +145             |     | 45-      |              | OR                     | +290=  | 0            |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |   |                                  |               |               |                                |                               |                  |     | TOTAL    |              | OR                     | TOTAL  | 866          |                        |
|   |   |                                  | ì             | ENTITY        | OR                             | OTHER<br>SMALL 6              | THAN             |     |          |              |                        |        |              |                        |
| <u> </u>  | CLAIMS AS AMENDED - PART II  COlumn 1) (Column 2) (Column 3)  CLAIMS HIGHEST  |                                  |               |               |                                |                               |                  |     |          | ALL          | ADDI-                  | l      |              | ADDI-                  |
| MATA  |   | REMAINING<br>AFTER<br>AMENDMENT  |               | NUM<br>PREVIO | BER<br>DUSLY                   |                               | PRESENT<br>EXTRA |     | RATE     |              | TIONAL                 |        | RATE         | TIONAL                 |
| AMENDMENT   | Total   | · /8                             | Minus         | -2            | 0                              |                               |                  | 1_  | X        | 9=           |                        | OR     | X\$18=       |                        |
| VEN   | Independent   | . 5/                             | Minus         | 4             | 1                              | =                             |                  | 1   | Y.       | 13           |                        | OR     | X86≈         |                        |
| ð   | FIRST PRESE   | NTATION OF MU                    | LTIPLE DEF    | ENDEN         | CLAIM                          |                               |                  | 1   |          | 45           |                        |        | +290=        |                        |
| <u></u>   |   |                                  |               |               |                                |                               |                  |     |          | 45=          |                        | OR     | TOTAL        |                        |
| 01.147  |   |                                  |               |               |                                |                               |                  |     |          |              | L                      | OR     | ADDIT. FEE   |                        |
| <u> </u>  | 11106   | (Column 1) (Column 2) (Column 3) |               |               |                                |                               |                  |     |          |              | ADDI                   | 1      |              | ADDI-                  |
| AMENDMENT B   |   | REMAINING<br>AFTER<br>AMENDMENT  |               | NUN<br>PREVI  | BER<br>OUSLY<br>FOR            |                               | PRESENT<br>EXTRA |     | R        | <b>LTE</b>   | ADDI-<br>TIONAL<br>FEE |        | RATE         | TIONAL<br>FEE          |
| DME   | Total   | .31                              | Minus         | -6            | 6                              | •                             | 15               |     | X        | \$ 9=        | <b>.</b>               | OF     | X\$18=       | 250                    |
| MEN   | Independent   | • 5                              | Minus         | (             | 5                              | • •                           |                  |     | ×        | 43=          |                        | OF     | X86=         |                        |
| Q.  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                  |               |               |                                |                               |                  |     | •        | 45=          |                        | OF     | +290=        |                        |
|   |   |                                  |               |               |                                |                               |                  |     |          | TOTAL        |                        | OF     | ADDIT. FE    |                        |
|   |   | (Column 1)                       |               | (Colu         | ımn 2)                         | (Co                           | iumn :           | 3}_ |          |              |                        |        |              |                        |
| AMENDMENT C   | `   | CLAIMS<br>REMAINING<br>AFTER     |               | NUI           | HEST<br>MBER<br>NOUSLY<br>OFOR |                               | ESEN1<br>EXTRA   |     | F        | ATE          | ADDI-<br>TIONAL<br>FEE | .]     | RATE         | ADDI-<br>TIONAL<br>FEE |
|   | Total   | AMENDMENT                        | Minus         | PAI           | PUR                            | ┇                             |                  | 1   | İ        | \$ 9=        | 1 2                    |        | X\$18*       |                        |
|   | Independent   |                                  | Minus         | ***           | ·                              | =                             |                  |     | $\vdash$ | 43=          | 1 -                    | 1      | Yes          |                        |
| Ž   |   | NTATION OF M                     | ULTIPLE DE    | IT CLAIM      |                                |                               |                  | H   |          | <del> </del> | -101                   |        | <del> </del> |                        |
|   |   |                                  |               |               |                                |                               |                  |     |          |              |                        | 01     | ` L          |                        |
| _   | If the entry in column 1 is less than the entry in column 2, write "0" in column 3.      TOTAL  OR ADDIT. FEE  OR ADDIT. FEE  OR ADDIT. FEE |                                  |               |               |                                |                               |                  |     |          |              |                        |        |              |                        |
|   | If the 'Highest No  | a . Ohan annable D               | aid For IN Th | HC COAC       | - w lace to                    |                               |                  | 1.  |          |              |                        | oox on | column 1.    | •                      |

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